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CERTIFICATE OF MAILING

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"Commissioner for Patents"
P.O. Box 1450, Alexandria, VA 22313-1450"

On August 18, 2004

RONALD A. KOATZ ATTORNEY FOR APPLICANT(S) REGISTRATION NO. 31,774 August 18, 2004 DATE OF SIGNATURE

RESPONSE UNDER 37 CFR §1.116 EXPEDITED PROCEDURE EXAMINING GROUP # 1617

PATENT

Y2-R352-EDG

J6662(C)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Customer No.:

000201

Applicant:

Hua et al.

Serial No.: Filed:

09/884,388 June 19, 2001

For:

MICROEMULSION FACIAL WASHES COMPRISING SPECIFIC

OILS

Group:

1617

Examiner:

Shahnam J. Sharareh

Edgewater, NJ 07020

August 18, 2004

AMENDMENT UNDER 37 CFR §1.116 IN RESPONSE TO OFFICE ACTION MAILED APRIL 21, 2004 INCLUDING ONE MONTH EXTENSION OF TIME

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Sir:

In response to the Office Action mailed April 21, 2004, a one-month extension of time for which is respectfully requested, please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 6 of this paper.

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on August 18, 2004

RONALD'A: KOATZ
Reg 'No. 31, 774
Attorney for Applicant(s)

UNITED STATES DEPT. OF COMMERCE Patent and Trademark Office

PATENT Y2-R352-EDG J6662(C)

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Hua et al. 10/884,388

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MICROEMULSION FACIAL WASHES COMPRISING SPECIFIC OILS

Group: 1617

Examiner: Shahnam J. Sharareh Edgewater, New Jersey 07020

August 18, 2004

Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] No additional fee is required.

The fee has been calculated as shown below.

CLAIMS AS AMENDED

	(2) * Claims Remaining After Amendment		(4)** Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	·	Minus			\$ 18.00	
Independent Claims		Minus			\$ 86.00	
Muttiple Claims					\$ 290.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$	

^{*}If the entry in Column (2) is less than the entry in Column (4), write "0" in Column (5).

**If the "Highest No. Previously Paid For" is less than "20," write "20" in this space.

[] Charge \$_____ to Deposit Acct. #12-1155. Triplicate copies of this letter are enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees, which may be required to our deposit account No. 12-1155, including all required fees under

[X] 37 C.F.R. § 1.16;

[X] 37 C.F.R. § 1.17;

[X] 37 C.F.R. § 1.18.

Triplicate copies of this letter are enclosed.

RAK/sc

(201) 840-2912

Ronald A. Koatz

Attorney of Record Reg. #31,774